		DEPARTMENT	ATE OF UTAH OF NATURAL RE F OIL, GAS AND				FOR	RM 3	
APPLICATION FOR PERMIT TO DRILL						1. WELL NAME and NUMBER Ute Tribal 5-3-4-1E			
2. TYPE OF WORK DRILL NEW WELL (iii)	N WELL	3. FIELD OR WILDCAT WILDCAT							
4. TYPE OF WELL Oil Well Coalbed Methane Well: NO						5. UNIT or COMMUNITIZATION AGREEMENT NAME			
6. NAME OF OPERATOR NEWFIELD PRODUCTION COMPANY						7. OPERATOR PHONE 435 646-4825			
8. ADDRESS OF OPERATOR Rt 3 Box 3630 , Myton, UT, 84052						9. OPERATOR E-MAIL mcrozier@newfield.com			
10. MINERAL LEASE NUMBER (FEDERAL, INDIAN, OR STATE) 20G0005609	11. MINERAL OWNERSHIP FEDERAL INDIAN STATE FEE FEE				12. SURFACE OWNERSHIP FEDERAL INDIAN STATE FEE				
13. NAME OF SURFACE OWNER (if box 12 = 'fee') Coleman Brothers LTD						14. SURFACE OWNER PHONE (if box 12 = 'fee')			
15. ADDRESS OF SURFACE OWNER (if box 12 = 'fee') Too Many to List, ,						16. SURFACE OWNER E-MAIL (if box 12 = 'fee')			
17. INDIAN ALLOTTEE OR TRIBE NAME (if box 12 = 'INDIAN')		18. INTEND TO COMMINGLE PRODUCTION FROM MULTIPLE FORMATIONS YES (Submit Commingling Application) NO (III)				19. SLANT VERTICAL DIRECTIONAL HORIZONTAL			
20. LOCATION OF WELL	FOO	TAGES	QTR-QTR	SECTI	ON	TOWNSHIP	RANGE	MERIDIAN	
OCATION AT SURFACE 1984 FI		L 662 FWL	SWNW	3		4.0 S	1.0 E	U	
Top of Uppermost Producing Zone 1984 FI		L 662 FWL	SWNW	3		4.0 S	1.0 E	U	
At Total Depth	1984 FN	L 662 FWL	SWNW	3		4.0 S	1.0 E	U	
21. COUNTY UINTAH	2. DISTANCE TO NEAREST LEASE LINE (Feet) 662				23. NUMBER OF ACRES IN DRILLING UNIT				
			DISTANCE TO NEAREST WELL IN SAME POOL oplied For Drilling or Completed) 2643			26. PROPOSED DEPTH MD: 8055 TVD: 8055			
27. ELEVATION - GROUND LEVEL		28. BOND NUMBER				29. SOURCE OF DRILLING WATER / WATER RIGHTS APPROVAL NUMBER IF APPLICABLE			
5277	RLB0010462					437478			
		АТ	TACHMENTS						
VERIFY THE FOLLOWING	ARE ATTACHE	D IN ACCORDANG	CE WITH THE U	TAH OIL	AND G	GAS CONSERVAT	ION GENERAL R	ULES	
WELL PLAT OR MAP PREPARED BY LICENSED SURVEYOR OR ENGINEER				COMPLETE DRILLING PLAN					
AFFIDAVIT OF STATUS OF SURFACE OWNER AGREEMENT (IF FEE SURFACE)				FORM 5. IF OPERATOR IS OTHER THAN THE LEASE OWNER					
DIRECTIONAL SURVEY PLAN (IF DIRECTIONALLY OR HORIZONTALLY DRILLED)				TOPOGRAPHICAL MAP					
NAME Mandie Crozier	TITLE Regulatory Tech			PHO	PHONE 435 646-4825				
SIGNATURE	DATE 10/06/2010	DATE 10/06/2010 EM/			AIL mcrozier@newfield.com				
API NUMBER ASSIGNED 43047513070000				Bassill					
	F				Permit Manager				

